

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54	1		1			
55		1				
56			1			
57				1		
58		1				
59			1			
60				1		
61					1	
62					1	
63						1
64			1			
65					1	
66						1
67					1	
68						1
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70						1
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72						1
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74						1
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84						1
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86						1
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88						1
89					1	
90						1
91					1	
92						1
93					1	
94						1
95					1	
96						1
97					1	
98						1
99					1	
100						1
TOTAL IND.	9		1		1	
TOTAL DEP.	4		1		1	
TOTAL CLAIMS	11		1		1	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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